

<b>COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY</b> (Includes Reference to PCT International Applications)	Attorney's Docket No. <b>5472-3PUS</b>
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As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

### INTERNAL SURFACE CHUCKING MECHANISM AND METHOD

the specification of which (check only one item below)

☐ is attached hereto

☐ was filed as United States application

Serial No.

on

and was amended

on \_ (if applicable).

☐ was filed as PCT international application

Number PCT/IL03/00127

on February 18, 2003

and was amended under PCT Article 19

on 12 March 2004.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

#### PRIOR FOREIGN/PCT APPLICATIONS AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

Country (if PCT, indicate "PCT")	Application Number	Date of Filing (day, month, year)	Priority Claimed Under 35 U.S.C. 119	
USA	60/357,995	20 February 2002	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
PCT	PCT/IL03/00127	18 February 2003	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
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			<input type="checkbox"/> YES	<input type="checkbox"/> NO

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Send correspondence to <i>Cohen, Pontani, Lieberman &amp; Pavane</i> at the address for the following customer Number: <b>27799</b>				Direct Telephone calls to: (name and telephone number) Thomas Langer (212) 687-2770
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.				
201	FULL NAME OF INVENTOR	FAMILY NAME <u>SIEV</u>	FIRST GIVEN NAME <u>Rami</u>	SECOND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY <u>Kiryat Haim</u>	STATE OR FOREIGN COUNTRY <u>ISRAEL</u>	COUNTRY OF CITIZENSHIP <u>ISRAEL</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>Yegi'a Kapaim Str. 13</u>	CITY <u>Kiryat Haim</u>	STATE & ZIP CODE/COUNTRY <u>Israel 26299</u>
202	FULL NAME OF INVENTOR	FAMILY NAME <u>SIEV</u>	FIRST GIVEN NAME <u>Gadi</u>	SECOND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY <u>Kiryat Haim</u>	STATE OR FOREIGN COUNTRY <u>ISRAEL</u>	COUNTRY OF CITIZENSHIP <u>ISRAEL</u>
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203	FULL NAME OF INVENTOR	FAMILY NAME <u>SIEV</u>	FIRST GIVEN NAME <u>Ahron</u>	SECOND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY <u>Farmington Hills</u>	STATE OR FOREIGN COUNTRY <u>MICHIGAN</u>	COUNTRY OF CITIZENSHIP <u>ISRAEL</u>
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204	FULL NAME OF INVENTOR	FAMILY NAME <u>DUNNER</u>	FIRST GIVEN NAME <u>Daniel</u>	SECOND GIVEN NAME
	RESIDENCE, CITIZENSHIP	CITY <u>Moutier</u>	STATE OR FOREIGN COUNTRY <u>SWITZERLAND</u>	COUNTRY OF CITIZENSHIP <u>SWITZERLAND</u>
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SIGNATURE OF INVENTOR 201 <i>Ken J.</i>	SIGNATURE OF INVENTOR 202 <i>Pauli</i>	SIGNATURE OF INVENTOR 203
DATE <i>July 29, 2004</i>	DATE <i>July 29, 2004</i>	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE
Additional inventor(s) name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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[illegible]

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SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203 <i>Alvin S...</i>
DATE	DATE	DATE <i>July 28/2009</i>
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE
Additional inventor(s) name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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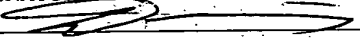
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SIGNATURE OF INVENTOR 204 	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE <b>JULY 28, 2004</b>	DATE	DATE
Additional inventor(s) name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		